

FOR CLAIMS RELATING TO THE VALUATION OF AN EXCLUSIVELY RESIDENTIAL 1, 2 OR 3 FAMILY HOME

**PART A: GENERAL INFORMATION**

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Condominiums only:

CA \_\_\_\_\_ Unit \_\_\_\_\_

Adjacent lots used as part of your home and included in your answers in parts B-G \_\_\_\_\_

Property address \_\_\_\_\_

Owner-applicant's name \_\_\_\_\_

Other owners' names \_\_\_\_\_

**PART B: OWNER'S ESTIMATE OF FULL MARKET VALUE (must be completed)**

I believe the market value of the property is → \$ \_\_\_\_\_

**PART C: CONTACT INFORMATION AND DESIGNATION OF REPRESENTATIVE**

 Representative: ☐ Self, relative or other unpaid representative ☐ Lawyer ☐ Tax reduction service or other paid representative

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

 ARC may schedule a conference in some cases. Which is your preference? ☐ No conference ☐ Telephone ☐ In-person

**PART D: PROPERTY INFORMATION**

 Year acquired \_\_\_\_\_ Price \$ \_\_\_\_\_ Was this an arms-length sale? ☐ Yes ☐ No Approximate year built \_\_\_\_\_

 Is property offered for sale or under contract? ☐ Yes ☐ No Price \$ \_\_\_\_\_ Attach contract of sale or listing.

 Has any construction or alteration been started or completed in the past 3 years? ☐ Yes ☐ No. Cost as of Jan 2. \$ \_\_\_\_\_

 During your ownership, have you expanded the house's living area by building up or out, or by converting a porch, garage, attic or basement? ☐ Yes ☐ No. If yes, describe in the space at end of Part C or in an attachment.

 Use: ☐ 1 family ☐ Mother/daughter ☐ 2 family ☐ 3 family ☐ Condominium ☐ Other: \_\_\_\_\_

Name of development or homeowners' association \_\_\_\_\_

 What part is currently used as a residence for the owners and their families? ☐ All ☐ Part: \_\_\_\_\_ ☐ None

 Is property rented or offered for rent? ☐ Yes ☐ No Number of units \_\_\_\_\_ Rent \$ \_\_\_\_\_ Attach copies of current leases.

 What is below the main part of the house? ☐ Finished basement ☐ Unfinished basement ☐ Crawl-space ☐ Slab

Fill-in the number of: Kitchens \_\_\_\_\_ Full baths \_\_\_\_\_ Half baths \_\_\_\_\_ Bedrooms \_\_\_\_\_ Other rooms \_\_\_\_\_

 Does house have: A garage? ☐ 1 car ☐ 2 cars ☐ 3+ cars ☐ None Central air conditioning? ☐ Yes ☐ No

 In-ground pool? ☐ Yes ☐ No Waterfront access? ☐ Yes ☐ No A professional office or business use? ☐ Yes ☐ No

 Are any of these adjacent to or visible from the house? ☐ Waterfront ☐ Street with a painted center line or other traffic separation  
☐ Railroad ☐ Commercial property ☐ Apartment house ☐ Golf course ☐ Park ☐ None of these

**You may file your appeal on line at [www.nassaucountyny.gov](http://www.nassaucountyny.gov)**

Other facts: \_\_\_\_\_

### PART E: ASSESSMENT REQUESTED

- a. Tentative assessment (optional) \$ \_\_\_\_\_
- b. Applicant's estimate of full market value (from Part B) \$ \_\_\_\_\_
- c. Correct level of assessment (optional)  $\times$  \_\_\_\_\_ %
- d. Requested assessment = line b  $\times$  c \$ \_\_\_\_\_
- e. Evidence of level of assessment (optional) \_\_\_\_\_

### PART F: RECENT SALES OF COMPARABLE HOUSES (optional)


List open market sales of homes similar to yours house that have recently sold. Describe any significant differences.

	Taxpayer's house	Sale #1	Sale #2	Sale #3
Section, block, lot				
House # and street				
Sale date (mo., yr.)				
Price, if known				
Comments				

### PART G: STATEMENT OF CLAIM AND CERTIFICATION (must be completed)

I am the owner, a buyer under contract or a qualified fiduciary or authorized representative of the owner or buyer. I ask the Assessment Review Commission to correct the assessment by multiplying my estimate of the full market value of the property by the correct level of assessment for Class 1 property on the Nassau County assessment rolls. If the result is less than the tentative assessment, I request that the assessment be reduced to that amount.

**I certify that all statements made in this application are true and correct to the best of my knowledge and belief and I understand that the making of any willful false statements of material fact herein will subject me to the provisions of the Penal Law relevant to the making and filing of false instruments.**

\_\_\_\_\_  \_\_\_\_\_  
Date Signature of applicant or representative

If signed by a fiduciary, print the name and capacity of the fiduciary here \_\_\_\_\_

### INSTRUCTIONS FOR FORM AR 1 See separate instruction sheet for more information

**File between January 2, 2006, and March 1, 2006. File your appeal on line at [www.nassaucountyny.gov](http://www.nassaucountyny.gov). Or, complete this form and mail or deliver it to the Assessment Review Commission, 240 Old Country Rd., Mineola, NY 11501. Use this form to contest the value of an exclusively residential 1, 2 or 3 family house or Class 1 condominium unit. Visit ARC's web site or call 516-571-2391 if you need other forms or instructions. Answer all of the questions in Parts A - D. Attach additional sheets or copies of documents as necessary. **Parts B and G must be completed; the application is defective if they are omitted.****